REMARKS

Claims 1-9 and 21-28 are pending in the application. Claims 1, 21, and 28 are the only independent claims.

Claims 1-20 are subject to a Restriction Requirement according to which the Examiner divided the claims into two groups, namely, Group I including claims 1-9 and 17-20 directed to an endoscopic retractor and Group II containing claims 10-16 drawn to a medical method.

Applicant elected the claims of Group I in a previously submitted Election and Amendment. Pursuant to that election, applicant now cancels non-elected claims 10-16 without prejudice to refilling those claims in a subsequent divisional application.

Claims Rejections - 35 U.S.C. §§ 102 and 103

Claims 1, 2, 6, 7, 9, 17, 19, and 20 stand rejected under 35 U.S.C. § 102(e) as being anticipated by U.S. Patent No. 6,409,723 to Edwards.

Claims 3-5 and 8 stand rejected under 35 U.S.C. § 103(a) as being unpatentable over Edwards in view of U.S. Patent No. 5,634,883 to Chin et al.

Claim 1 Applicant respectfully traverses the rejection of claim 1 under 35 U.S.C. § 102(e) and maintains that claim 1 is distinguishable over that reference.

As set forth in original claim 1, an endoscopic retractor instrument assembly comprises (a) an insertion or deployment tube insertable through a channel of an endoscopic instrument, (b) a balloon or bladder having a pair of expandable or inflatable end members and at least one expandable or inflatable spacer member connecting the end members to one another, the balloon or bladder being disposed in a collapsed configuration inside the tube; and (c) inflation means operatively coupled with the balloon or bladder for inflating the balloon or bladder from the collapsed configuration to

an expanded use configuration in which the spacer member pushes the end members apart from one another.

Edwards discloses a medical treatment device comprising a catheter (110) carrying a distal balloon member (113), a proximal balloon member (114), and a treatment structure (115) therebetween. The treatment structure includes a shaped balloon (211) having a cylindrical shape with an indentation (212) and a treatment element (213) disposed in the indentation.

In contrast to applicant's invention as set forth in claim 1, the middle balloon (211) of the Edwards device does not connect the proximal balloon member (114) to the distal balloon member (113). Instead, it is a catheter (110) that connects the proximal balloon member to the middle balloon and to the distal balloon. In further contrast applicant's invention as set forth in claim 1, the middle balloon (211) of the Edwards device does not and cannot push the proximal and distal balloons (214, 213) apart from one another. The balloons are all fixed to the catheter and do not push against one another. According to the Edwards disclosure and particularly Figure 1, the balloons (113, 114, 211) are all spaced from one another. There is nothing in the Edwards disclosure that suggests that the balloons could be so expanded that the middle balloon (213) would push against the end balloons.

Claim 21 According to applicant's new claim 21, an endoscopic retractor instrument assembly comprises an insertion or deployment tube insertable through a channel of an endoscopic instrument. A balloon or bladder disposed in a collapsed configuration inside the tube includes a pair of expandable or inflatable end members and at least one expandable or inflatable spacer member connecting the end members to one another so that the end members and the spacer member communicate with one another. Inflation componentry is operatively coupled with the balloon or bladder for inflating the balloon or bladder from the collapsed configuration to an expanded use configuration. At least one of the end members is formed with an aperture or opening traversable by an

endoscope insertion member of the endoscopic instrument after an inflation of the balloon or bladder from the collapsed configuration to the expanded use configuration.

Edwards discloses a medical treatment device comprising a catheter (110) carrying a distal balloon member (113), a proximal balloon member (114), and a balloon shape (213) therebetween. The balloons of the Edwards device are all mounted to and surround the catheter (110, 111, 112), which extends from a biopsy channel (121) of an endoscopic insertion member (120). Clearly, to the extent that the balloons of the Edwards device may be viewed as having apertures or openings, those openings are ***not*** traversable by an endoscope insertion member of the endoscopic instrument. On one hand, the catheter occupies the openings. The balloons are attached to the catheter at those openings. Moreover, the openings in the balloons are too small for the endoscopic insertion member. It would not have been obvious to one of ordinary skill in the art familiar with the Edwards disclosure to enlarge the openings in the balloons to the diameter of the endoscopic insertion member.

Claim 28 As recited in new claim 28, an endoscopic retractor instrument assembly comprises an insertion or deployment tube insertable through a channel of an endoscopic instrument and further comprises a balloon or bladder including a pair of expandable or inflatable end members and a plurality of expandable or inflatable spacer member connecting the end members to one another so that the end members and the spacer members communicate with one another. The balloon or bladder is disposed in a collapsed configuration inside the tube. Inflation componentry is operatively coupled with the balloon or bladder for inflating the balloon or bladder from the collapsed configuration to an expanded use configuration. The spacer members are spaced from one another and asymmetrically disposed to provide an enlarged window or opening on one side to facilitate unobstructed access to an interior wall of an organ.

Edwards does not disclose a plurality of spaced spacer balloon members. With respect to Figure 1 of Edwards, the intermediate balloon of Edwards is not a spacer

member. The space between the proximal balloon (114) and the distal balloon (113) is set by the attachment points of the proximal and distal balloons to the catheter (110), not by the intermediate balloon (213). With respect to Figure 3 of Edwards, there is a single inflatable/deflatable treatment structure (313) and no proximal and distal balloons. The cage structure of that drawing includes a plurality of electrodes (315) that traverse extrusion ports (316).

The electrode members (315) of Edwards appear to be symmetrically disposed rather than asymmetrically disposed, as set forth in new claim 28, to provide an enlarged window or opening on one side to facilitate unobstructed access to an interior wall of an organ.

Conclusion

For the foregoing reasons, independent claims 1, 21, and 28, as well as the claims dependent therefrom, are deemed to be in condition for allowance. An early Notice to that effect is earnestly solicited.

Should the Examiner believe that direct contact with applicant's attorney would advance the prosecution of this application, the Examiner is invited to telephone the undersigned at the number below.

Respectfully submitted,

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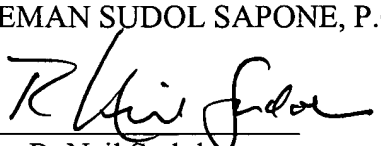
By: 

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